



Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/21 (12-97)
Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application Number	10/763,869	
	Filing Date	02/04/2004	
	First Named Inventor	Fisher et al.	
	Group Art Unit	2651	
	Examiner Name		
Total Number of Pages in This Submission	3	Attorney Docket Number	Sony-05800

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to File Corrected Papers <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) 1 Sheet (Figure 8) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Notice to File Corrected Application Papers Postcard		
<table border="1"><tr><td>Remarks</td><td>The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit overpayment to Deposit Account No: 50-1963. A duplicate copy of this authorization is enclosed.</td></tr></table>			Remarks	The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit overpayment to Deposit Account No: 50-1963. A duplicate copy of this authorization is enclosed.
Remarks	The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit overpayment to Deposit Account No: 50-1963. A duplicate copy of this authorization is enclosed.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Richard H. Butler
Signature	
Date	6/7/04

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: PO Box 1450, Alexandria, VA 22313 on this date: 6/7/04			
Type or printed name	Richard H. Butler		
Signature		Date	6/7/04

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.